

**Listing of Claims**

1-45. (canceled)

46. (new) A method of inhibiting recurrence of a tumor in a subject, comprising:  
administering a therapeutically effective amount of a monoclonal antibody  
obtained from hybridoma 1D11.16 (ATCC Accession No. HB 9849), or a humanized equivalent  
thereof, to the subject in order to block an immunosuppressive effect of transforming growth  
factor (TGF)- $\beta$  in the subject, wherein the subject is at risk for recurrence of the tumor, and  
wherein the monoclonal antibody or humanized antibody is specific for TGF- $\beta$  and neutralizes  
an activity of TGF- $\beta$ , thereby inhibiting recurrence of the tumor in the subject.

47. (new) The method of claim 46, wherein the monoclonal antibody or the  
humanized antibody inhibits TGF- $\beta$  from binding a TGF- $\beta$  receptor.

48. (new) The method of claim 46, wherein the subject is a human.

49. (new) The method of claim 46, wherein the tumor is benign or malignant.

50. (new) The method of claim 46, wherein the tumor comprises a carcinoma, a  
sarcoma, a leukemia, a lymphoma, or a tumor of the nervous system.

51. (new) The method of claim 46, wherein the tumor comprises a breast tumor, a  
liver tumor, a pancreatic tumor, a gastrointestinal tumor, a colon tumor, a uterine tumor, a  
ovarian tumor, a cervical tumor, a testicular tumor, a brain tumor, a skin tumor, a melanoma, a  
retinal tumor, a lung tumor, a kidney tumor, a bone tumor, a prostate tumor, a nasopharygeal  
tumor, a thyroid tumor, a leukemia, or a lymphoma.

52. (new) The method of claim 46, wherein the monoclonal antibody or the  
humanized antibody is administered intravenously, subcutaneously, intradermally, or  
intramuscularly.

53. (new) The method of claim 46, wherein blocking the immunosuppressive effect of the TGF- $\beta$  results in increased immunosurveillance by lymphocytes of the subject.

54. (new) The method of claim 53, wherein the lymphocytes comprise T cells or B cells.

55. (new) The method of claim 53, wherein the lymphocytes include T cells, and the T cells comprise a cytotoxic T lymphocyte (CTL), a CD8<sup>+</sup> CTL, a CD4<sup>+</sup> cell, a CD4<sup>+</sup> CD1d-restricted T cell, an NKT cell, or a combination thereof.

56. (new) The method of claim 53, wherein increased immunosurveillance is measured by an increased biological activity of the lymphocyte.

57. (new) The method of claim 56, wherein the increased activity of the lymphocyte is measured by a CTL assay.

58. (new) The method of claim 57, wherein the CTL assay comprises a chromium release assay.

59. (new) The method of claim 46, wherein the monoclonal antibody or the humanized antibody inhibits TGF- $\beta$  receptor signaling.

60. (new) A method of enhancing an activity of an immune cell to inhibit recurrence of a tumor, comprising:

contacting a TGF- $\beta$  receptor-expressing immune cell with an anti-TGF- $\beta$  monoclonal antibody that is obtained from hybridoma 1D11.16 having ATCC Accession No. HB 9849, or a humanized equivalent thereof, wherein the monoclonal antibody or the humanized antibody blocks a TGF- $\beta$  signaling pathway and wherein blocking the TGF- $\beta$  signaling pathway results in increased activity of the immune cell, wherein the increased activity is increased tumor

immunosurveillance, thereby enhancing the activity of the immune cell to inhibit recurrence of the tumor.

61. (new) The method of claim 60, wherein the TGF- $\beta$  receptor-expressing immune cell is a T cell or a B cell.

62. (new) The method of claim 60, wherein the TGF- $\beta$  receptor-expressing immune cell includes T cells and the T cells comprise a CTL, a CD8<sup>+</sup> CTL, a CD4<sup>+</sup> cell, a CD4<sup>+</sup> CD1d-restricted T cell, or an NKT cell.

63. (new) A method of enhancing an immune response in a subject to inhibit recurrence of a tumor, comprising:

administering to the subject a therapeutically effective amount of an anti-TGF- $\beta$  monoclonal antibody that is obtained from hybridoma 1D11.16 having ATCC Accession No. HB 9849, or a humanized equivalent thereof, wherein the monoclonal antibody or the humanized antibody blocks a TGF- $\beta$  signaling pathway and wherein blocking the TGF- $\beta$  signaling pathway results in increased tumor immunosurveillance in the subject, thereby enhancing the immune response in the subject to inhibit recurrence of a tumor.

64. (new) The method of claim 63, wherein the immune response is a T cell response.

65. (new) The method of claim 64, wherein the T cell response comprises a CTL response, a CD8<sup>+</sup> CTL response, a CD4<sup>+</sup> T cell response, a CD4<sup>+</sup> CD1d-restricted T cell response or an NKT cell response.

66. (new) The method of claim 63, wherein the subject is a human.

67. (new) The method of claim 46, administering a therapeutically effective amount of the monoclonal antibody obtained from hybridoma 1D11.16.

68. (new) The method of claim 46, administering a therapeutically effective amount of a humanized equivalent of the monoclonal antibody obtained from hybridoma 1D11.16.

69. (new) The method of claim 60, administering a therapeutically effective amount of the monoclonal antibody obtained from hybridoma 1D11.16.

70. (new) The method of claim 60, administering a therapeutically effective amount of a humanized equivalent of the monoclonal antibody obtained from hybridoma 1D11.16.

71. (new) The method of claim 63, administering a therapeutically effective amount of the monoclonal antibody obtained from hybridoma 1D11.16.

72. (new) The method of claim 63, administering a therapeutically effective amount of a humanized equivalent of the monoclonal antibody obtained from hybridoma 1D11.16.